CAMPBELL COUNTY & CITIES, KENTUCKY

2004 ANNUAL RECONCILIATION OF PAYROLL LICENSE FEES WITHHELD

For Year Ending December 31, 2004

W-2 forms MUST accompany this reconciliation. See instructions on reverse.

SECTION A. QUARTERLY FEES REMITTED IN 2004

TYPE OR PRINT EMPLOYER NAME & ADDRESS:				
ADDRESS:	QUARTER			
	ENDING	CAMPBELL COUNTY	CITY:(CITY NAME)	
	MAR 31	\$	\$	
	JUN 30	\$	\$	
CAMPBELL CO. ACCT ID#:	SEP 30	\$	\$	
FEDERAL EMPLYOYER ID#:	DEC 31	\$	\$	
PREPARER SIGNATURE & TITLE:	TOTAL FEE REMITTED:		Φ	
X	KEWIIIED		\$	
DATE:PHONE #:		(To Line 6 BELOW)	(To Line 6 BELOW)	
SECTION B. RECONCILIATION	CAI	MPBELL COUNTY	CITY: (CITY NAME)	
 Total Gross Compensation Paid to Employees 	_			
2. Total Excluded Compensation Paid in Excess of Maximum Taxable per Employee (see Fig. A, Instructions)				
3. Taxable Compensation (Subtract total in Line 2 from Total in Line 1				
4. Total Withholding Fees Due (multiply Line 3 by Tax Rate for Jurisdiction (see Fig. A, Instructions)				
5. Total Fees Withheld per W-2s				
6. Enter TOTAL FEES REMITTED DURING 2004 FROM SECTION A ABOVE				
7. DIFFERENCE between Lines 6 and 4 (if any, check applicable box below				
Minor difference due to fractional variations only (no adjus	tment due)			
Difference shows insufficient remittance for year. PAYMENT ATTACHED.				
Difference indicates overpayment not due to fractional vari	ations. EXPLANA	TION		

Reconciliation and W-2s must be received by February 28, 2005. MAIL W-2 COPIES AND ANNUAL RECONCILIATION FORM SEPARATELY FROM 4 QUARTER RETURN.

CC-AR REV 1204

INSTRUCTIONS FOR 2004 ANNUAL RECONCILIATION OF EMPLOYER CC-AR REV 1204 **OUARTERLY WITHHOLDING**

Reconciliation and W-2s must be received by February 28, 2005. MAIL W-2 COPIES AND ANNUAL RECONCILIATION FORM SEPARATELY FROM 4TH OUARTER RETURN.

GENERAL INFORMATION:

Each employer shall on or before February 28 of each year complete and file an Annual Reconciliation of Employer Quarterly Withholding. Either copies of federal Forms W-2 or a detailed employee listing with equivalent information must be submitted. Each employer shall furnish each employee a statement on or before January 31 of each year showing the amount of compensation and the license fees deducted and paid by said employer during the preceding calendar year.

IN THE BOX PROVIDED, PRINT THE EMPLOYER NAME, ADDRESS, CAMPBELL COUNTY TAX ACCOUNT NUMBER, AND FEDERAL EMPLOYER IDENTIFICTION NUMBER.

PREPARER SHALL SIGN AND DATE THE RECONCILIATION AND PROVIDE HIS/HER TITLE AND PHONE NUMBER.

MAKE A PHOTOCOPY OF THE BLANK RECONCILIATION FORM IF YOU ARE REPORTING FEES PAID TO MORE THAN ONE CITY IN CAMPBELL COUNTY.

HOW TO RECONCILE YOUR PAYROLL AND WITHHOLDINGS:

SECTION A. Enter the total Payroll Withholding Fees paid for each quarter of 2004 for each jurisdiction. Use additional sheets as necessary to report compensation paid for more than one city in Campbell County.

ENTER THE TOTAL AMOUNT REMITTED ALSO ON LINE 6 IN SECTION B.

SECTION B.

LINE 1: "TOTAL GROSS COMPENSATION TO EMPLOYEES." Enter the total gross compensation for all employees for Campbell County and each City. Deduct any compensation for services performed outside of Campbell County. Use additional sheets as necessary to report compensation paid for more than one city in Campbell County.

LINE 2: "TOTAL EXCLUDED COMPENSATION PAID IN EXCESS OF MAXIMUM TAXABLE." Enter the compensation to employees in excess of the Maximum Wage Limit per Individual for each employee for the calendar year - SEE TABLE BELOW.

LINE 3: "TAXABLE COMPENSATION," The amount of compensation subject to tax. Subtract Line 2 from Line 1.

LINE 4: "TOTAL WITHHOLDING FEES DUE." Multiply the result in Line 3 by the payroll withholding rate for Campbell County and each City - SEE TABLE BELOW.

LINE 5: "TOTAL FEES WITHHELD PER W-2s." Enter the total amount of fees withheld shown in the W-2 listing for Campbell County and each City.

LINE 6: "TOTAL FEES REMITTED DURING 2004." Enter result from Section A for Campbell County and each City. LINE 7: "DIFFERENCE BETWEEN LINES 6 AND 4." Enter the difference for Campbell County and each City. Check the appropriate box explaining any differences. ATTACH ANY REMITTANCE BALANCE DUE (Not necessary if balance due is less than \$1.00). NO REFUNDS OR CREDIT WILL RESULT FROM ENTRIES MADE ON THIS FORM, SUBMIT A COPY OF THE ORIGINAL QUARTERLY RETURN, MARKED "AMENDED RETURN" AND SHOWING THE CORRECTED WITHHOLDING AMOUNTS, FOR ANY QUARTER THAT HAS BEEN OVERPAID. CALL THE OCCUPATIONAL LICENSE OFFICE WITH QUESTIONS.

FIG. A LOCALITY TAX TABLE 2004					
Locality	Tax Withholding Rate	Wage "Cap"	Maximum Tax Per Employee		
Campbell County	.0105	\$37,905	\$398		
Fort Thomas City	.0125	NO "WAGE CAP"	NO MAXIMUM		
Alexandria City	.0150	\$87,900	\$1,318		
Cold Spring City	.0050	\$100,000	\$500		
Southgate City	.0200	NO "WAGE CAP"	NO MAXIMUM		
Highland Heights	.0100	\$100,000	\$1000		

MAIL COMPLETED RECONCILIATION WITH ATTACHMENTS AND ANY REMITTANCE TO:

CAMPBELL COUNTY FISCAL COURT

Occupational License Office

P.O. Box 72958

Newport, Kentucky 41072-0958

IF YOU HAVE OUESTIONS ABOUT THE FORMS AND INSTRUCTIONS. CONTACT: